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PTO/SB/29 (12/97)

Approved for through 09/30/00, OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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CLAIMS

(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
Total Claims (37 CFR 1.16(c))	21 - 20 =	1	X \$ 18.00 =	\$ 18.00
Independent Claims (37 CFR 1.16(b))	4 - 3 =	1	X \$ 78.00 =	\$ 78.00
Multiple Dependent Claims (if applicable) (37 CFR 1.16(d))			+ \$ 87.00 =	\$ 87.00
			BASIC FEE (37 CFR 1.16(a))	\$ 760.00
Total of above Calculations				= \$ 847.00
Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28).				\$
TOTAL				= \$ 847.00

6. Small entity status:

- a. A small entity statement is enclosed.
- b. A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.
- c. Is no longer claimed.

7. ☒ The Commissioner is hereby authorized to credit overpayments, underpayments or charge the following fees to

Deposit Account No. 500516

- a. Fees required under 37 CFR 1.16.
- b. Fees required under 37 CFR 1.17.
- c. Fees required under 37 CFR 1.18.

8. ☒ A check in the amount of \$ 847.00 is enclosed.

9. ☒ Other: Change of Correspondence Address, Return Receipt Postcard
Copy of parent application (16 pages Specification, 3 pages Claims, Abstract, Drawing)
Copy of Declaration and Assignments as filed, Microfiche Appendix (17 pages)

NOTE: The prior application's correspondence address will carry over to this CPA UNLESS a new correspondence address is provided below.**10. NEW CORRESPONDENCE ADDRESS**

Customer Number or Bar Code Label
OR
(Insert Customer No. or Attach Bar Code Label here)

☒ New Correspondence Address Below

NAME Joe Zheng

ADDRESS UP Patent Office
800 Chesapeake Drive

CITY Redwood City STATE California ZIP CODE 94063

COUNTRY USA TELEPHONE (408-777-9887) FAX 650-817-1499

11. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME Joe Zheng

REGISTRATION NO. 39,450

SIGNATURE [Signature]

DATE February 24, 1999

12/01/97